Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 1 of 55

| Fill in this information to identify your case: | | |
|---|---------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|---|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on | Brooke | |
| | your government-issued picture identification (for example, your driver's | First name | First name |
| | | L. | |
| | license or passport). | Middle name | Middle name |
| | Bring your picture | Davis | |
| | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | |
| 2. | All other names you have used in the last 8 years | Brooke L. Heidbrick | |
| | Include your married or maiden names. | | |
| | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-4616 | |
| | , , | | |

Doc 1 Filed 07/10/17 Case 17-20499

Document

Case number (if known)

Entered 07/10/17 13:08:18 Page 2 of 55 Desc Main

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|---|---|---|---|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs | | | |
| 5. | Where you live | 223 Heritage Trail | If Debtor 2 lives at a different address: | | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Lake | | | | |
| | | County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

Debtor 1 Brooke L. Davis

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 3 of 55

Debtor 1 Brooke L. Davis

Case number (if known)

| Par | t 2: Tell the Court About | our B | ankruptcy Ca | ise | | | | | |
|-----|---|---|----------------------------------|--|--|---|--|--|--|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | |
| | choosing to file under | Chapter 7 | | | | | | | |
| | | □ cl | napter 11 | | | | | | |
| | | □ Cl | hapter 12 | | | | | | |
| | | □ cl | hapter 13 | | | | | | |
| | | | | | | | | | |
| 3. | How you will pay the fee | | about how yo | ne entire fee when I file my petition. Please check with the clerk's office in your local court for more of you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or rur attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check daddress. | | | | | |
| | | | | | | option, sign and attach the Application | for Individuals to Pay | | |
| | | | ŭ | | s (Official Form 103A). ived (You may request this or | otion only if you are filing for Chapter | 7 By law a judge may | | |
| | | _ | but is not req applies to you | uired to, waive y ur family size an | your fee, and may do so only it ad you are unable to pay the fe | f your income is less than 150% of the se in installments). If you choose this Official Form 103B) and file it with you | e official poverty line that option, you must fill out | | |
| Э. | Have you filed for bankruptcy within the last 8 years? | ■ No | | | | | | | |
| | last o years: | ште | District | | When | Case number | | | |
| | | | District | | | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | Diotriot | | When | Case Hamber | | | |
| 10. | Are any bankruptcy cases pending or being | ■ No |) | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Ye | S. | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if know | wn | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | wn | | |
| 11. | Do you rent your | ■ No | Go to I | ine 12. | | | | | |
| | residence? | ☐ Ye | | our landlord obta | nined an eviction iudament aga | ainst you and do you want to stay in y | our residence? | | |
| | | <u> </u> | .sac | No. Go to line | , , , | , , | | | |
| | | | | | itial Statement About an Evicti | ion Judgment Against You (Form 101) | A) and file it with this | | |
| | | | | | | | | | |

Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Case 17-20499 Desc Main

Document Debtor 1 Brooke L. Davis

Page 4 of 55

Case number (if known)

| Par | Report About Any Bu | sinesses | You Own | as a Sole Proprie | tor | | |
|-----|---|---------------------------|--|--------------------------------------|---|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | and location of bus | siness | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | per, Street, City, Sta | te & ZIP Code | | |
| | it to this petition. | | Chec | k the appropriate bo | ox to describe your business: | | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as d | lefined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | e | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B). | | | | |
| | For a definition of small | ■ No. | I am r | not filing under Chap | oter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Ba Code. | | | | |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Par | t 4: Report if You Own or | Have Any | · Hazardo | ous Property or An | y Property That Needs Immediate Attention | | |
| 14. | Do you own or have any | ■ No. | | | | | |
| | property that poses or is alleged to pose a threat | ☐ Yes. | | | | | |
| | of imminent and identifiable hazard to public health or safety? | nent and ble hazard to | | the hazard? | | | |
| | Or do you own any property that needs immediate attention? | | | diate attention is why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | | | |
| | | | | | Number, Street, City, State & Zip Code | | |
| | | | | | | | |

Debtor 1 Brooke L. Davis

Document Page 5 of 55

Case number (if known)

Part 5: Explain Your Eff

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

7/10/17 1:00PM

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-20499

Debtor 1 Brooke L. Davis

Doc 1 Filed 07/10/17

Entered 07/10/17 13:08:18 Page 6 of 55

Desc Main

Document Case number (if known)

| Par | 6: Answer These Quest | ions for R | eporting Purposes | | | | | |
|-----|--|---|--|---|----------------------|--|--|--|
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily consuindividual primarily for a personal | | | 1 U.S.C. § 101(8) as "incurred by an | | |
| | | | ☐ No. Go to line 16b. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | 16b. | Are your debts primarily busine money for a business or investme | | | | | |
| | | | □ No. Go to line 16c. □ Yes. Go to line 17. | | | | | |
| | | | | | | | | |
| | | 16c. | State the type of debts you owe to | hat are not consumer debts | or business debts | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. G | Go to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | I am filing under Chapter 7. Do yo are paid that funds will be available | | | xcluded and administrative expenses | | |
| | administrative expenses are paid that funds will | | ■ No | | | | | |
| | be available for distribution to unsecured creditors? | | Yes | | | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-1 □ 200-9 | 99 | ☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000 | | 25,001-50,000 50,001-100,000 More than100,000 | | |
| | | □ 200-9 | 99 | | | | | |
| 19. | How much do you estimate your assets to | □ \$0 - \$ | • | □ \$1,000,001 - \$10 millio | | \$500,000,001 - \$1 billion | | |
| | be worth? | | 01 - \$100,000 | □ \$10,000,001 - \$50 mi □ \$50,000,001 - \$100 m | | \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion | | |
| | | | 001 - \$500,000 001 - \$1 million | □ \$100,000,001 - \$500 r | | More than \$50 billion | | |
| 20. | How much do you estimate your liabilities to be? | 1 \$100, | 50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$1,000,001 - \$10 millio □ \$10,000,001 - \$50 mi □ \$50,000,001 - \$100 m □ \$100,000,001 - \$500 r | llion 🗆 | \$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion | | |
| Par | t7: Sign Below | | | | | | | |
| For | you | I have ex | amined this petition, and I declare | under penalty of perjury tha | t the information pr | ovided is true and correct. | | |
| | | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | |
| | | I request | relief in accordance with the chapt | ter of title 11, United States | Code, specified in | this petition. | | |
| | | bankrupt and 357 | | | | ty by fraud in connection with a both. 18 U.S.C. §§ 152, 1341, 1519, | | |
| | | Brooke | L. Davis e of Debtor 1 | Signature | e of Debtor 2 | | | |
| | | Executed | | Executed | d on | | | |
| | | | MM / DD / YYYY | | | | | |

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 7 of 55

Debtor 1 Brooke L. Davis

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David M. Siegel | Date | July 10, 2017 | |
|--|---------------|----------------|--|
| Signature of Attorney for Debtor | | MM / DD / YYYY | |
| David M. Siegel | | | |
| Printed name | | | |
| David M. Siegel & Associates | | | |
| Firm name | | | |
| 790 Chaddick Drive | | | |
| Wheeling, IL 60090 | | | |
| Number, Street, City, State & ZIP Code | | | |
| Contact phone (847) 520-8100 | Email address | | |
| #06207611 | | | |
| Bar number & State | | | |

7/10/17 1:00PM

DOCUMENT Page 8 of 55

Fill in this information to identify your case:

Debtor 1 Brooke L. Davis
First Name Middle Name Last Name

Debtor 2 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

☐ Check if this is an amended filing

Official Form 106Sum

Case number

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Pa | t 1: Summarize Your Assets | | |
|----|---|-------------|--------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 212,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 62,850.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 274,850.00 |
| Pa | t 2: Summarize Your Liabilities | | |
| | | | abilities at you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 227,622.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 73,110.00 |
| | Your total liabilities | \$ | 300,732.00 |
| Pa | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,312.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,312.00 |
| Pa | Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for | a personal | , family, or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

Document Page 9 of 55
Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Brooke L. Davis

| | Total cl | aim |
|--|----------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 21,533.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 21,533.00 |

| | Cas | e 17-20499 | Doc 1 | Filed 07/10/17 | Entered 07/10/17 Page 10 of 55 | 7 13:08:18 | Desc I | Main 7/10/17 1:00PM |
|------|---|----------------------------------|--------------------------------------|---|--|--------------------|-----------------------------------|--|
| FIII | in this informa | tion to identify yo | our case and t | | | | | |
| Del | otor 1 | Brooke L. Davi | _ | lle Name | Last Name | | | |
| | otor 2 ouse, if filing) | First Name | Midd | lle Name | Last Name | | | |
| Uni | ted States Bank | ruptcy Court for the | e: NORTHE | RN DISTRICT OF ILLI | NOIS | | | |
| Cas | se number | | | | _ | | | Check if this is an amended filing |
| n ea | chedule ch category, sep c it fits best. Be a | s complete and acc | cribe items. List urate as possib | ole. If two married peopl | an asset fits in more than one o e are filing together, both are e le top of any additional pages, | qually responsible | e for supplyi | ng correct |
| | o you own or hav | | able interest in | any residence, building | , land, or similar property? | | | |
| 1.1 | 223 Heritage Street address, if a | Trail vailable, or other descrip | tion | □ ' | | the amount of any | secured clair | or exemptions. Put ms on Schedule D: ocured by Property. |
| | Hainesville City | IL 6 | 50030-0000 ZIP Code | Land Investment pr Timeshare Other Who has an interes | t in the property? Check one | | D.00 ure of your oble, tenancy | rrent value of the rtion you own? \$212,000.00 wherest by the entireties, or |
| | | | | Debtor 1 only | | i ee siiipie | | |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$212,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

| Deb | | Case 17-204 Brooke L. Davis | | Filed 07/10/17 Document | Page 11 of 55 | 17 13:08:18 se number (if known) | Desc M | ain 7/10/17 1:00PN |
|--------------------|--|--|--|---|-------------------------------|--|-------------------------|---|
| 3. C a | | | | icles, motorcycles | | | | |
| | | ,, | , | , | | | | |
| | No | | | | | | | |
| | Yes | | | | | | | |
| 3.1 | Make: | Honda | | Who has an interest in the | o proporty? Check one | Do not deduct sec | ured claims or | exemptions. Put |
| 3.1 | Model: | Civic | | _ | e property? Check one | the amount of any Creditors Who Hav | | |
| | Year: | 2016 | | ■ Debtor 1 only□ Debtor 2 only | | | | |
| | | nate mileage: | 38,000k | Debtor 1 and Debtor 2 of | nnly | Current value of t entire property? | | nt value of the on you own? |
| | | formation: | | ☐ At least one of the debte | | | • | • |
| | | larris Bank NA ed Lien \$22,039 | | Check if this is commo | unity property | \$14,650 | .00 | \$14,650.00 |
| .p Part Do y | ages you 3: Descri | have attached for have any legal | or Part 2. Write the | nat number here | om Part 2, including any | | portion Do not o | \$14,650.00 It value of the you own? deduct secured or exemptions. |
| E | <i>xamples:</i> I No | goods and furni Major appliances escribe | | china, kitchenware | | | | |
| | | H | ousehold Good | ls & Furniture | | | | \$1,000.00 |
| E | ectronics xamples: l No l Yes. De | Televisions and rincluding cell pho | | dia players, games | oment; computers, printers | s, scanners; music o | ollections; ele | ectronic devices |
| E | | other collections, | irines; paintings, p memorabilia, colle | | oks, pictures, or other art o | objects; stamp, coin, | or baseball c | ard collections; |
| E | | musical instrume | ohic, exercise, and | l other hobby equipment; | bicycles, pool tables, golf | clubs, skis; canoes a | and kayaks; c | arpentry tools; |
| 10. F | irearms | | notguns, ammunitio | on, and related equipmen | t | | | |

| | Case 17-2 | 0499 | Doc 1 | |)7/10/17 Iment | Entered | d 07/10/17 13:08 | :18 | Desc Main | 7/10/17 1:00PM |
|---------------------------|---|-------------|------------------|--------------|-----------------------|--------------------------------------|-----------------------------------|------------|--|---------------------|
| Debtor 1 | Brooke L. Da | vis | | Doce | iiii c iii | | of 55 Case number (if I | known) | | |
| ☐ Yes. | Describe | | | | | | | | | |
| □ No | oles: Everyday clot | thes, furs, | leather coats | s, designer | wear, shoes | accessories | | | | |
| ■ Yes. | Describe | | | | | | | | | |
| | | Normal | Apparel | | | | | | | \$300.00 |
| ■ No | | elry, cost | ume jewelry, | engageme | nt rings, wed | ding rings, hei | rloom jewelry, watches, ç | gems, go | old, silver | |
| Exam _l ■ No | rm animals oles: Dogs, cats, b | irds, hors | es | | | | | | | |
| | | househo | old items you | u did not a | lready list, ii | ncluding any | health aids you did not | list | | |
| | Give specific info | rmation | | | | | | Г | | |
| | the dollar value o art 3. Write that n | | | | | | pages you have attach | ed | \$ 1 | 1,600.00 |
| Part 4: De | scribe Your Financi | ial Assets | | | | | | | | |
| | vn or have any le | | uitable intere | est in any o | of the follow | ing? | | | Current value portion you Do not deducted claims or ex | own? oct secured |
| ■ No | oles: Money you ha | • | | | · | | on hand when you file you | ır petitio | n | |
| Exam | | | | | | of deposit; sha titution, list ea | res in credit unions, brok ch. | erage ho | ouses, and other | similar |
| □ No ■ Yes | | | | | Institution r | ame: | | | | |
| | | 17.1. | Checking A | Account | First Nort | hern Credit | Union | | | \$1,600.00 |
| | | 17.2. | Savings Ad | ccount | First Nort | hern Credit | Union | | | \$0.00 |
| | , mutual funds, o oles: Bond funds, i | | | | ge firms, mor | ney market acc | counts | | | |
| ☐ Yes | | lr | nstitution or is | suer name | : | | | | | |
| | ublicly traded sto enture | ck and in | nterests in in | corporate | d and unince | orporated bus | sinesses, including an i | interest | in an LLC, partı | nership, and |
| | Give specific info | | | | | | % of ownership | | | |
| | | inain | e of entity: | | | | → or ownership | | | |

| | Case 17-20499 | Doc 1 | Filed 07/10/17 Document | Entered 07/10/17 13:08:18 Page 13 of 55 | Desc Main 7/10/17 1:00PM |
|-----------------------|--|--|-----------------------------|---|---|
| Debtor 1 | Brooke L. Davis | | 2004 | Case number (if known | |
| Nego Non-r ■ No | negotiable instruments are th | ersonal check hose you can | s, cashiers' checks, pro | egotiable instruments missory notes, and money orders. by signing or delivering them. | |
| ☐ Yes. | Give specific information al | bout them er name: | | | |
| | ment or pension accounts ples: Interests in IRA, ERIS. | | 1(k), 403(b), thrift saving | s accounts, or other pension or profit-sharing | g plans |
| ■ Yes. | List each account separate Type o | ely. f account: | Institution r | name: | |
| | 401(k) |) | ERISA Qu | ualified | \$25,000.00 |
| | Pensi | on | ERISA Qu | ualified | \$20,000.00 |
| Your s Exam | | you have ma | | tinue service or use from a company ctric, gas, water), telecommunications compa | anies, or others |
| ■ No □ Yes. | | | Institution r | name or individual: | |
| 23. Annui | ties (A contract for a period | ic payment of | money to you, either for | r life or for a number of years) | |
| | lssuer name | and descript | ion. | | |
| | ts in an education IRA, in .C. §§ 530(b)(1), 529A(b), a | | | ogram, or under a qualified state tuition p | rogram. |
| | | | | ne records of any interests.11 U.S.C. § 521(o | |
| ■ No | s, equitable or future interests. Give specific information a | | rty (other than anythin | g listed in line 1), and rights or powers ex | kercisable for your benefit |
| 26. Patent Exam | ts, copyrights, trademarks ples: Internet domain name | s , trade secre s, websites, p | | | |
| 27. Licens | ses, franchises, and other | general inta | | n holdings, liquor licenses, professional licer | nses |
| ☐ Yes. | Give specific information a | about them | | | |
| Money or | property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | funds owed to you Give specific information al | bout them, inc | cluding whether you alre | ady filed the returns and the tax years | |
| ■ No | | alimony, spo | usal support, child suppo | ort, maintenance, divorce settlement, proper | ty settlement |

Desc Main Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Page 14 of 55

Case number (if known) Document Debtor 1 **Brooke L. Davis** 30 Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: Life Insurance Policies Term \$0.00 **Death Benefit Only** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$46,600,00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

☐ Yes. Give specific information.......

Desc Main Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18

Page 15 of 55

Case number (if known) Document **Brooke L. Davis**

Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$212,000.00 Part 2: Total vehicles, line 5 \$14,650.00 57. Part 3: Total personal and household items, line 15 \$1,600.00 Part 4: Total financial assets, line 36 58. \$46,600.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$62,850.00 Copy personal property total \$62,850.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$274,850.00

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1

| | | Docume | nt Page 16 of 55 | | |
|---|-------------------------|-------------------|------------------|--------------------------------------|--|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Brooke L. Davis | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | ☐ Check if this is an amended filing | |
| | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | unt of the exemption you claim | Specific laws that allow exemption | |
|--|--------------------------------------|------|---|------------------------------------|--|
| | Copy the value from Schedule A/B | Chec | ck only one box for each exemption. | | |
| 223 Heritage Trail Hainesville, IL 60030 Lake County | \$212,000.00 | | \$15,000.00 | 735 ILCS 5/12-901 | |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2016 Honda Civic 38,000k miles BMO Harris Bank NA | \$14,650.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | |
| Secured Lien \$22,039 Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Household Goods & Furniture Line from Schedule A/B: 6.1 | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) | |
| Line nom <i>Schedule AVD</i> . 9.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| TV & Electronics Line from Schedule A/B: 7.1 | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(b) | |
| Line Irom Scriedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Normal Apparel Line from Schedule A/B: 11.1 | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(a) | |
| LINE HOLL GOLLEGALE AV.D. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

Desc Main Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18

Case 17-20499 Document Page 17 of 55 Brooke L. Davis Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking Account: First Northern** 735 ILCS 5/12-1001(b) \$1,600.00 \$1,600.00 **Credit Union** 100% of fair market value, up to Line from Schedule A/B: 17.1 any applicable statutory limit **Savings Account: First Northern** 735 ILCS 5/12-1001(b) \$0.00 \$0.00 **Credit Union** Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit 401(k): ERISA Qualified 735 ILCS 5/12-1006 \$25,000.00 \$25,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **Pension: ERISA Qualified** 735 ILCS 5/12-1006 \$20,000.00 \$20,000.00 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit

| 3. | Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No | |
|----|--|--|
| | Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No | |

\$0.00

Life Insurance Policies Term

Death Benefit Only Line from Schedule A/B: 31.1

Yes

215 ILCS 5/238

\$0.00

100% of fair market value, up to any applicable statutory limit

Document Page 18 of 55 Fill in this information to identify your case: Debtor 1 **Brooke L. Davis** Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this portion value of collateral. claim If any **BMO Harris Bank NA** Describe the property that secures the claim: \$22,039.00 \$14,650.00 \$7,389.00 Creditor's Name 2016 Honda Civic 38,000k miles **BMO Harris Bank NA** Secured Lien \$22,039 As of the date you file, the claim is: Check all that Po Box 94934 apply Palatine, IL 60069 ☐ Contingent Number, Street, City, State & Zip Code Unliquidated □ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured ■ Debtor 1 only car loan) Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) \square At least one of the debtors and another Judgment lien from a lawsuit ☐ Check if this claim relates to a **Purchase Money Security** Other (including a right to offset) community debt Opened 12/15 Last Active 6700 Date debt was incurred 3/28/17 Last 4 digits of account number 2.2 | Pennymac Loan Services Describe the property that secures the claim: \$205,583.00 \$212,000.00 \$0.00 Creditor's Name 223 Heritage Trail Hainesville, IL 60030 Lake County As of the date you file, the claim is: Check all that 6101 Condor Dr. apply Moorpark, CA 93021 ☐ Contingent Number, Street, City, State & Zip Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured) ■ Debtor 1 only car loan) Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit

Official Form 106D

Document Page 19 of 55

Debtor 1 Brooke L. Davis Case number (if know) First Name Middle Name Last Name ☐ Check if this claim relates to a **Mortgage Balance** Other (including a right to offset) community debt Opened 06/15 Last Active h311 Date debt was incurred 8/03/16 Last 4 digits of account number \$227,622.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$227,622.00 Write that number here: Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.2 Julie Dejong 15W030 North Frontage Road, Ste. 10 Last 4 digits of account number 0031 Burr Ridge, IL 60527 Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.2 PennyMac Loan Services PO Box 9109 Last 4 digits of account number Temecula, CA 92589-9109 Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.2 PennyMac Loan Services, LLC PO Box 660929 Last 4 digits of account number 3502

Dallas, TX 75266-0929

| | Ca | ıse 17-20499 E | | led 07/10/17 Document | Entere Page 20 | ed 07/10/17 13:08::) of 55 | 18 Des | sc Main | 7/10/17 1:00PM |
|-----------------------|--|---|--------------------|--------------------------|-------------------|--|----------------|----------------|----------------|
| Fill | in this inforr | nation to identify your o | | 24.1111.111 | 1 000. 21 | 7 (11 . 7. 7 | | | |
| | tor 1 | | | | | | | | |
| Den | 101 1 | Brooke L. Davis First Name | Middle Na | ame | Last Name | | | | |
| Deb | tor 2 | | | | | | | | |
| (Spou | use if, filing) | First Name | Middle Na | ame | Last Name | | | | |
| Unit | ed States Ba | nkruptcy Court for the: | NORTHERN | DISTRICT OF ILLI | NOIS | | | | |
| Cas | e number | | | | | | | | |
| (if kno | own) | | | _ | | | | Check if this | is an |
| | | | | | | | а | ımended filir | ng |
| Դffi | icial Forn | n 106E/F | | | | | | | |
| | | :/F: Creditors W | ho Havo | Uncocured (| Claime | | | 15 | 2/15 |
| | | | | | | Part 2 for creditors with NONP | DIODITY ala: | | |
| iche eft. A ame | dule D: Credit Attach the Con and case nur | ors Who Have Claims Sec | ured by Propert | y. If more space is no | eeded, copy t | any creditors with partially se he Part you need, fill it out, ni lo not file that Part. On the to | umber the en | tries in the b | oxes on the |
| Part | | II of Your PRIORITY Un | | | | | | | |
| 1. | Do any credito — | ors have priority unsecure | d claims agains | t you? | | | | | |
| | No. Go to P | art 2. | | | | | | | |
| | Yes. | | | | | | | | |
| | | II of Your NONPRIORIT | | | | | | | |
| 3. I | Do any credito | ors have nonpriority unsec | ured claims ag | ainst you? | | | | | |
| | ☐ No. You ha | ve nothing to report in this pa | art. Submit this f | orm to the court with y | our other sche | dules. | | | |
| | Yes. | | | | | | | | |
| t | unsecured clair | m, list the creditor separately | for each claim. | For each claim listed, | identify what t | holds each claim. If a creditor ype of claim it is. Do not list clain three nonpriority unsecured cla | ms already ind | cluded in Part | 1. If more |
| | | | | | | | | Total claim | ı |
| 4.1 | Baxter | Credit Union | | Last 4 digits of acco | unt number | 2738 | | \$ | 14,001.00 |
| | Nonpriority | y Creditor's Name | | | | | | | <u> </u> |
| | 340 N N | lilwaukee Ave | | When was the debt i | ncurred? | Opened 02/13 Last A 10/02/16 | ctive | | |
| | | Hills, IL 60061 | | | | | | _ | |
| | | treet City State Zlp Code rred the debt? Check one. | | As of the date you fil | le, the claim i | s: Check all that apply | | | |
| | Debtor | 1 only | | ☐ Contingent | | | | | |
| | ☐ Debtor | 2 only | | ☐ Unliquidated | | | | | |
| | ☐ Debtor | 1 and Debtor 2 only | | ☐ Disputed | | | | | |
| | ☐ At leas | t one of the debtors and and | other | Type of NONPRIORI | TY unsecured | l claim: | | | |
| | ☐ Check | if this claim is for a comr | nunity | ☐ Student loans | | | | | |
| | debt | m auhiast ta -#+0 | | | | ration agreement or divorce tha | t you did not | | |
| | | m subject to offset? | | report as priority claim | | g plans, and other similar debts | | | |
| | ■ No | | | • | = | y pians, and other similar debts | | | |
| | ☐ Yes | | | Other. Specify | urcnases | | | _ | |

Document Page 21 of 55

Debtor 1 Brooke L. Davis Case number (if know) 4.2 \$5,127.00 **Baxter Credit Union** Last 4 digits of account number 0100 Nonpriority Creditor's Name Opened 08/12 Last Active 400 North Lakeview Parkway When was the debt incurred? 2/03/17 Vernon Hills, IL 60061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts 2006 Volkswagen Passat ☐ Yes Other. Specify Automobile Deficiency 4.3 **Baxter Credit Union** Last 4 digits of account number 3895 \$1,205.00 Nonpriority Creditor's Name Opened 08/10 Last Active PO Box 8133 When was the debt incurred? 4/17/17 Vernon Hills, IL 60061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify loan 4.4 Cap One Last 4 digits of account number 0900 \$492.00 Nonpriority Creditor's Name Bankruptcy Dept. Opened 10/16 Last Active PO Box 30285 When was the debt incurred? 5/11/17 Salt Lake City, UT 84130-0285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Purchases** Other. Specify

Case 17-20499

Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main 7/10/17 1:00PM Page 22 of 55 Case number (if know) Document

| 4.5 | Dept Of Education/neln Nonpriority Creditor's Name | Last 4 digits of account number | 4924 | \$5,106.00 |
|-----|--|--|---|------------|
| | 3015 Parker Rd Aurora, CO 80014 | When was the debt incurred? | Opened 02/09 Last Active 5/18/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | ☐Yes | ☐ Other. Specify | | |
| | | Student Lo | an | |
| 4.6 | Dept Of Education/neln Nonpriority Creditor's Name | Last 4 digits of account number | 1224 | \$4,884.00 |
| | 3015 Parker Rd Aurora, CO 80014 | When was the debt incurred? | Opened 08/09 Last Active 5/18/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d alaim. | |
| | At least one of the debtors and another | Student loans | u Claini. | |
| | ☐ Check if this claim is for a community debt | | | |
| | Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| | | Student Lo | an | |
| 1.7 | Dept Of Education/neln | Last 4 digits of account number | 9424 | \$3,001.00 |
| | Nonpriority Creditor's Name 3015 Parker Rd Aurora, CO 80014 | When was the debt incurred? | Opened 08/10 Last Active 5/18/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ■ Student loans □ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | 2 | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Student Lo | an | |

Debtor 1 Brooke L. Davis

Debtor 1 Brooke L. Davis

Document Page 23 of Cas

Page 23 of 55 Case number (if know) 7/10/17 1:00PI

| 4.8 | Dept Of Education/neln Nonpriority Creditor's Name | Last 4 digits of account number | 5024 | \$2,917.00 |
|----------|--|--|---|------------|
| | 3015 Parker Rd Aurora, CO 80014 | When was the debt incurred? | Opened 02/09 Last Active 5/18/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | a plans, and other similar debts | |
| | ☐ Yes | | g pians, and other similar debts | |
| | ☐ Yes | ☐ Other. Specify Student Lo | an | |
| | | Student Lo | ali | |
| 4.9 | Dept Of Education/neln | Last 4 digits of account number | 1324 | \$2,791.00 |
| | Nonpriority Creditor's Name 3015 Parker Rd Aurora, CO 80014 | When was the debt incurred? | Opened 08/09 Last Active 5/18/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | | |
| | Yes | Other. Specify | | |
| | | Student Lo | an | |
| 4.1 0 | Dept Of Education/neln | Last 4 digits of account number | 9524 | \$1,334.00 |
| | Nonpriority Creditor's Name 3015 Parker Rd Aurora, CO 80014 | When was the debt incurred? | Opened 08/10 Last Active 5/18/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Student Lo | an | |

Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main 7/10/17 1:00PM Case 17-20499

Document

Page 24 of 55 Case number (if know)

| Debtor | Brooke L. Davis | | Case number (if know) | | | |
|--------|--|--|--|-------------|--|--|
| 4.1 | Kay Jewelers | Last 4 digits of account number | 2859 | \$2,292.00 | | |
| 1 | Nonpriority Creditor's Name | Last 4 digits of account number | | ΨΣ,Σ3Σ.00 | | |
| | 375 Ghent Rd Fairlawn, OH 44333 | When was the debt incurred? | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| | Yes | Other. Specify Purchases | | | | |
| 4.1 | Kohl/Cap1 | Last 4 digits of account number | 1779 | \$1,089.00 | | |
| | Nonpriority Creditor's Name PO Box 6497 Sioux Falls, SD 57117 | When was the debt incurred? | Opened 05/15 Last Active 3/14/17 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | | |
| | No | Debts to pension or profit-sharin | | | | |
| | Yes | Other. Specify Purchases | | | | |
| 4.1 | Lois Kulinsky & Associates, LTD. | Last 4 digits of account number | | \$13,696.00 | | |
| | Nonpriority Creditor's Name Attorneys at Law 395 East Dundee Rd., Ste. 200 | When was the debt incurred? | | | | |
| | Wheeling, IL 60090 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | |
| | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa | ration agreement or divorce that you did not | | | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| | ☐ Yes | ■ Other. Specify Services | | | | |
| | | Carlot. Opcomy | | | | |

Document Page 25 of 55
Case number (if know)

Debtor 1 Brooke L. Davis 4.1 Northwestern Lake Forest Hospital \$895.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 660 N. Westmoreland Road When was the debt incurred? Lake Forest, IL 60045-1659 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.1 **ONEMAIN** 3896 \$2,597.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/16 Last Active 230 Randall Road When was the debt incurred? 8/24/16 South Elgin, IL 60177-2274 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other. Specify 4.1 \$100.00 Perakis, Resis, Woods & Assoc Last 4 digits of account number 6 Nonpriority Creditor's Name 3 Hawthorn Pkwy, Suite 150 When was the debt incurred? Vernon Hills, IL 60061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Services

Desc Main

Document Page 26 of 55

Debtor 1 Brooke L. Davis Case number (if know) 4.1 SYNCB/JC PENNEY DC 4504 \$3,875.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/12 Last Active PO Box 965007 When was the debt incurred? 3/17/17 Orlando, FL 32896-5007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Purchases** Other. Specify 4.1 SYNCB/Old Navy 1005 \$3,384.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 10/15 Last Active PO Box 965005 When was the debt incurred? 10/13/16 Orlando, FL 32896-5005 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Purchases** Other. Specify 4.1 Target NB 3425 \$2,824.00 Last 4 digits of account number Nonpriority Creditor's Name **CCS Gray OPS Center** Opened 08/12 Last Active PO Box 6497 When was the debt incurred? 3/05/17 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other. Specify

Entered 07/10/17 13:08:18

Desc Main

7/10/17 1:00PN

Debtor 1 Brooke L. Davis

Document Page 27 of 55
Case number (if know)

| 4.2 0 | University Accounting Service LLC | Last 4 digits of account number | | \$1,500.00 |
|-----------------------|--|--|--|-------------------------|
| | Nonpriority Creditor's Name PO Box 5291 | When was the debt incurred? | 2016 - 2017 | |
| | Carol Stream, IL 60197 | When was the dept incurred: | 2010 - 2017 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt | Obligations arising out of a seg | paration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-shar | ing plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Student L | oan | |
| Part 3 | List Others to Be Notified About a De | obt That You Already Listed | | |
| 5. Use to is try have | this page only if you have others to be notified ying to collect from you for a debt you owe to se more than one creditor for any of the debts the fied for any debts in Parts 1 or 2, do not fill out | about your bankruptcy, for a debt that omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add | in Parts 1 or 2, then list the collection agency | here. Similarly, if you |
| | and Address | On which entry in Part 1 or Part 2 did yo | _ | |
| | tal 1 Bank : General Correspondence | | Part 1: Creditors with Priority Unsecured Clai | |
| | ox 30285 | | Part 2: Creditors with Nonpriority Unsecured | Claims |
| Salt I | Lake City, UT 84130 | | | |
| | • | Last 4 digits of account number | | |
| Name | and Address | On which entry in Part 1 or Part 2 did yo | ou list the original creditor? | |
| Capit | tal One Bank Usa | | Part 1: Creditors with Priority Unsecured Clai | ms |
| | 0 Capital One Dr | I | Part 2: Creditors with Nonpriority Unsecured | Claims |
| Richi | mond, VA 23238 | Last 4 digits of account number | | |
| | | 0 1:1 1:5 14 5 10 1:1 | F - 1 - 1 - 1 - 1 - 1 - 1 - 1 | |
| | and Address tal One Bank, N.A. | On which entry in Part 1 or Part 2 did yo Line 4.4 of (<i>Check one</i>): | iu list the original creditor? \square Part 1: Creditors with Priority Unsecured Clai | me |
| | Box 71083 | | Part 2: Creditors with Nonpriority Unsecured | |
| Char | lotte, NC 28272-1083 | • | Part 2: Creditors with Nonpriority Unsecured | Claims |
| | | Last 4 digits of account number | | |
| Name | and Address | On which entry in Part 1 or Part 2 did yo | ou list the original creditor? | |
| | of Ed/Navient | Line 4.5 of (Check one): | Part 1: Creditors with Priority Unsecured Clai | ms |
| _ | Box 9635 | I | Part 2: Creditors with Nonpriority Unsecured | Claims |
| Wilke | es Barre, PA 18773 | Last 4 digits of account number | | |
| | | | | |
| | and Address | On which entry in Part 1 or Part 2 did yo | | |
| | RB/JC Penneys Box 981402 | | Part 1: Creditors with Priority Unsecured Clai | |
| | aso, TX 79998 | | Part 2: Creditors with Nonpriority Unsecured | Claims |
| | , | Last 4 digits of account number | | |
| Name | and Address | On which entry in Part 1 or Part 2 did yo | uplist the original creditor? | |
| | RB/JC Penneys | · _ · _ · · | \square Part 1: Creditors with Priority Unsecured Clai | ms |
| | Box 965007 | | Part 2: Creditors with Nonpriority Unsecured | |
| Orlar | ndo, FL 32896 | | | |
| | | Last 4 digits of account number | | |
| | and Address | On which entry in Part 1 or Part 2 did yo | | |
| | RB/Jcp | | Part 1: Creditors with Priority Unsecured Clai | |
| | Box 960090 ndo, FL 32896-0090 | I | Part 2: Creditors with Nonpriority Unsecured | Claims |
| Jilal | 140, I L 02030-0030 | Last 4 digits of account number | | |
| Nama | and Address | On which entry in Part 1 or Part 2 did yo | utilist the original creditor? | |
| ivallie | and Addices | On which entry in Fall 1 of Fall 2 did yo | u not the original oreutol! | |

Official Form 106 E/F

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 28 of 55

Case number (if know)

| Debtor 1 Brooke L. Davis | Document | Case number (if know) | | | |
|---|--|---|--|--|--|
| GECRB/JCP PO Box 984100 | Line 4.17 of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Claims | | | |
| El Paso, TX 79998 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| , | Last 4 digits of account numb | per | | | |
| Name and Address | | art 2 did you list the original creditor? | | | |
| Kohl/Capital One | Line 4.12 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| PO Box 3115 Milwaukee, WI 53201-3115 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| | Last 4 digits of account numb | per | | | |
| Name and Address | | art 2 did you list the original creditor? | | | |
| SYNCB/JC Penney DC | Line 4.17 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| PO Box 965036 Orlando, FL 32896-5036 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Onando, i E 32030-3030 | Last 4 digits of account numb | per | | | |
| Name and Address | On which entry in Part 1 or P | art 2 did you list the original creditor? | | | |
| SYNCB/JC Penneys | Line 4.17 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| PO Box 965036 Orlando, FL 32896-5036 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Onando, 1 E 32030-3030 | Last 4 digits of account numb | per | | | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | |
| Target NB | Line 4.19 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| Attn:Bankruptcy Dept. PO Box 673 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Minneapolis, MN 55440 | | | | | |
| • | Last 4 digits of account numb | per | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | 7 | Total Claim |
|--------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | 1 | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ | 21,533.00 |
| claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 51,577.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 73,110.00 |
| | | | | | |

Page 29 of 55 Document Fill in this information to identify your case: Debtor 1 **Brooke L. Davis** First Name Middle Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Numbe | whom you have the r, Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|-------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | City | | State | Zii Code | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |
| 2.5 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| | | | | | |

| | 0436 17 20433 | Docume | nt Page 30 o | f 55 | 7/10/17 1:00PM |
|---|--|--|---|---|--|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Brooke L. Davis | | | | |
| Dahtan 0 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | ng) First Name | Middle Name | Last Name | | |
| United Stat | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numb (if known) | per | | | | ☐ Check if this is an amended filing |
| Official | Form 106H | | | | |
| Sched | ule H: Your Cod | ebtors | | | 12/15 |
| eople are ill it out, ar our name | are people or entities who a filing together, both are equ nd number the entries in the and case number (if known) you have any codebtors? (If | ally responsible for supp boxes on the left. Attach . Answer every question. | lying correct informati the Additional Page to | on. If more space is need this page. On the top of | ed, copy the Additional Page, |
| ■ No | | | | | |
| ■ No □ Yes | | | | | |
| | nin the last 8 years, have you a, California, Idaho, Louisiana | | | | tes and territories include |
| ` | Go to line 3. Did your spouse, former sport | use, or legal equivalent live | with you at the time? | | |
| in line Form | 2 again as a codebtor only i | f that person is a guarant | or or cosigner. Make s | sure you have listed the cr | th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | P Code | | Column 2: The credito Check all schedules that | r to whom you owe the debt at apply: |
| 3.1 | Name | | | _ ☐ Schedule D, line ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line _ | |
| | Number Street City | State | ZIP Code | _ | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line ☐ Schedule G, line _ | |
| - | Number Street | | | _ | |

State

City

ZIP Code

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 31 of 55

| ebtor 1 Brooke L. D | avie | | |
|---|-------------------------------|--|--|
| | avis | | |
| ebtor 2 | | | |
| nited States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | |
| ase number | | | Check if this is: |
| known) | | - | ☐ An amended filing |
| | | | A supplement showing postpetition chapte 13 income as of the following date: |
| Official Form 106I | | | MM / DD/ YYYY |
| Schedule I: Your Inc | ome | | 12 |
| act 1: Describe Employment | On the top of any addition | onal pages, write your name and | d case number (if known). Answer every questi |
| <u> </u> | On the top of any additi | Onal pages, write your name and | Debtor 2 or non-filling spouse |
| Fill in your employment information. If you have more than one job, | | | |
| Fill in your employment information. If you have more than one job, attach a separate page with information about additional | On the top of any addition | Debtor 1 | Debtor 2 or non-filing spouse |
| Fill in your employment information. If you have more than one job, attach a separate page with | | Debtor 1 ■ Employed | Debtor 2 or non-filing spouse ■ Employed |
| Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. | Employment status | Debtor 1 ■ Employed □ Not employed Customer Service | Debtor 2 or non-filing spouse ■ Employed |
| Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or | Employment status Occupation | Debtor 1 ■ Employed □ Not employed Customer Service Representative | Debtor 2 or non-filing spouse ■ Employed □ Not employed |

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 5,848.00 \$ 0.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 5,848.00 \$ 0.00

Official Form 106I Schedule I: Your Income page 1

Page 32 of 55 Document

Debtor 1 Brooke L. Davis Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 5.848.00 \$ 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 1,271.00 0.00 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 170.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 0.00 Insurance 5e. 5e. 648.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5q. **Union dues** 5q. \$ 83.00 0.00 5h. Other deductions. Specify: Life Ins 5h.+ \$ \$ 0.00 13.00 \$ \$ **Mutual Benefit** 81.00 0.00 \$ \$ ESP Loan 233.00 0.00 **Employee Giving** 22.00 0.00 **Legal Services** 15.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 6. 2,536.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. 3.312.00 0.00 List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 0.00 0.00 8h. Interest and dividends 8b. 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Rc. 0.00 0.00 **Unemployment compensation** 8d. 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 0.00 0.00 Pension or retirement income 8g. \$ \$ 0.00 8g. 0.00 Other monthly income. Specify: 8h.+ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 0.00 0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 3,312.00 \$ 0.00 3,312.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 3,312.00 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 33 of 55 Page 33 of 55

| Fill | in this informa | ition to identify yo | our case: | | | | | |
|---|----------------------------|-------------------------------------|------------------|---|--|------------|----------------------|---|
| Deb | Brooke L. Davis | | | Check if this is: | | | | |
| Dah | otor O | | | | | | An amended filing | |
| | otor 2 ouse, if filing) | | | | | | 13 expenses as of | ving postpetition chapter the following date: |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | | | | MM / DD / YYYY | | | |
| 01111 | iod Oldioo Bariki | aproy Court for the | | ILIAT BIOTAGE OF ILL | | | W.W. 7 22 7 1 1 1 1 | |
| | se number .nown) | | | | | | | |
| (| | | | | | | | |
| 0 | fficial Fo | rm 106J | | | | | | |
| | | | Evnor | 1606 | | | | 40/45 |
| | | J: Your I | | ISES If two married people | are filing together he | oth are en | ually responsible fo | 12/15 |
| info | ormation. If m | | eded, atta | ch another sheet to thi | | | | |
| Par | t 1: Descr | ribe Your House | hold | | | | | |
| 1. | Is this a joir | nt case? | | | | | | |
| | ■ No. Go to | line 2. | | | | | | |
| | ☐ Yes. Doe | es Debtor 2 live i | in a separ | ate household? | | | | |
| | □N | - | | | | | | |
| | ПΥ | es. Debtor 2 mus | st file Offici | al Form 106J-2, Expens | es for Separate House | hold of De | btor 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | | | | Daughter | | 2 | ■ Yes |
| | | | | | | | _ | □ No |
| | | | | | Son | | 5 | Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| 3. | Do vour ext | oenses include | _ | NI- | | | | ☐ Yes |
| 0. | expenses o | f people other tl | han $_{\square}$ | No | | | | |
| | yourself and | d your depende | nts? □ | Yes | | | | |
| Par | t 2: Estim | ate Your Ongoi | ng Month | ly Expenses | | | | |
| exp | | | | uptcy filing date unless y is filed. If this is a su | | | | apter 13 case to report f the form and fill in the |
| Inc | luda avnanca | s poid for with r | non ooch | government assistance | if you know | | | |
| | | | | government assistance cluded it on <i>Schedule I</i> . | | | | |
| (Of | ficial Form 10 |)6I.) | | | | | Your exp | enses |
| 4. | | | | ses for your residence | . Include first mortgage | e 4. | ¢ | 1,798.00 |
| | | nd any rent for the | e ground C | л Юl. | | ٦. | * | |
| | If not includ | led in line 4: | | | | | | |
| | | estate taxes | _ | , . | | 4a. | : | 0.00 |
| | | rty, homeowner's | | | | 4b. | · ——— | 0.00 |
| | | maintenance, re owner's associat | | upkeep expenses dominium dues | | 4c. 4d. | · ———— | 0.00 0.00 |
| 5. | | | | our residence, such as h | nome equity loans | 5. | | 0.00 |

| Deb | tor 1 | Brooke L. Davis | Case num | ber (if known) | |
|-------------|--------|--|-------------|----------------|-----------------------------|
| 6. | Utilit | ies: | | | |
| | 6a. | Electricity, heat, natural gas | 6a. | \$ | 100.00 |
| | 6b. | Water, sewer, garbage collection | 6b. | \$ | 70.00 |
| | 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 140.00 |
| | 6d. | Other. Specify: | 6d. | \$ | 0.00 |
| 7. | Food | and housekeeping supplies | 7. | \$ | 415.00 |
| 8. | Child | care and children's education costs | 8. | \$ | 0.00 |
| 9. | Cloth | ning, laundry, and dry cleaning | 9. | \$ | 65.00 |
| 10. | Pers | onal care products and services | 10. | \$ | 70.00 |
| 11. | Medi | cal and dental expenses | 11. | \$ | 0.00 |
| 12. | Tran | sportation. Include gas, maintenance, bus or train fare. | | _ | 460.00 |
| | | ot include car payments. | 12. | · | 160.00 |
| | | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | · — | 0.00 |
| | | itable contributions and religious donations | 14. | \$ | 0.00 |
| 15. | | rance. | | | |
| | | of include insurance deducted from your pay or included in lines 4 or 20. | 45- | Φ. | 0.00 |
| | | Life insurance | 15a. | · | 0.00 |
| | | Health insurance | 15b. | · | 0.00 |
| | | Vehicle insurance | 15c. | · - | 75.00 |
| 4.0 | | Other insurance. Specify: | 15d. | \$ | 0.00 |
| 16. | Spec | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | 16. | \$ | 0.00 |
| 17 | • | Ilment or lease payments: | | Ψ | 0.00 |
| 17. | | Car payments for Vehicle 1 | 17a. | \$ | 419.00 |
| | | Car payments for Vehicle 2 | 17b. | · | 0.00 |
| | | Other Specify | 17c. | * | 0.00 |
| | | Other. Specify: | 17d. | · | 0.00 |
| 18 | | payments of alimony, maintenance, and support that you did not report as | | Ψ | 0.00 |
| 10. | | cted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | | \$ | 0.00 |
| 19. | | r payments you make to support others who do not live with you. | | \$ | 0.00 |
| | Spec | ify: | 19. | | |
| 20. | Othe | r real property expenses not included in lines 4 or 5 of this form or on Sche | edule I: Yo | our Income. | |
| | 20a. | Mortgages on other property | 20a. | \$ | 0.00 |
| | 20b. | Real estate taxes | 20b. | \$ | 0.00 |
| | 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | 20e. | Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| 21. | Othe | r: Specify: | 21. | +\$ | 0.00 |
| 22 | Calc | ulate your monthly expenses | | | |
| ZZ . | | Add lines 4 through 21. | | \$ | 2 212 00 |
| | | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | Ψ | 3,312.00 |
| | | | | Ψ | |
| | 22C. | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 3,312.00 |
| 23. | Calc | ulate your monthly net income. | | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 3,312.00 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 3,312.00 |
| | | | | | , |
| | 23c. | Subtract your monthly expenses from your monthly income. | | | 0.00 |
| | | The result is your monthly net income. | 23c. | \$ | 0.00 |
| 24. | For ex | Du expect an increase or decrease in your expenses within the year after you cample, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage? | | | se or decrease because of a |
| | | | | | |

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 35 of 55 Desc Main $\frac{7/10/17}{1:00PM}$

| Fill in this info | ormation to identify your | case: | | | |
|----------------------------------|--|--------------------------|-----------------------------|-------------------------|--|
| Debtor 1 | Brooke L. Davis | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States I | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| Declara | rm 106Dec ation About a | | | | 12/15 |
| obtaining mon years, or both. | | connection with a bank | | | nent, concealing property, or or imprisonment for up to 20 |
| Did you բ | pay or agree to pay some | one who is NOT an attor | ney to help you fill out ba | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | uptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | nalty of perjury, I declare are true and correct. | that I have read the sum | mary and schedules filed | I with this declaration | and |
| X /s/Bı | rooke L. Davis | | X | | |
| | ke L. Davis | | Signature of D | Debtor 2 | |
| Signa | ture of Debtor 1 | | | | |
| Date | July 10, 2017 | | Date | | |

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 36 of 55

| Fill in this info | ormation to identify you | r case: | | | |
|---------------------------------|--|--|---|--|---|
| Debtor 1 | Brooke L. Davis | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| Official F | orm 107 | | | | |
| | | Affairs for Individ | duals Filing for B | ankruptcy | 4/1 |
| information. If number (if kno | f more space is needed, own). Answer every que | ible. If two married people a attach a separate sheet to stion. arital Status and Where You | this form. On the top of an | | |
| | our current marital statu | | Lived Belore | | |
| _ | | 13: | | | |
| ☐ Marri ■ Not n | ed narried | | | | |
| 2. During th | e last 3 years, have you | lived anywhere other than | where you live now? | | |
| □ No | | | | | |
| Yes. | List all of the places you I | ived in the last 3 years. Do no | ot include where you live nov | I. | |
| Debtor 1 | Prior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ac | ldress: | Dates Debtor 2 lived there |
| | umn Lane Hills, IL 60061 | From-To: 8/16 To 5/17 | ☐ Same as Debtor | 1 | ☐ Same as Debtor 1 From-To: |
| states and terri No Ves. | <i>tories</i> include Arizona, Ca | ver live with a spouse or leg lifornia, Idaho, Louisiana, Ne hedule H: Your Codebtors (O | vada, New Mexico, Puerto R | | |
| Fill in the t | otal amount of income yo | nployment or from operatin u received from all jobs and a have income that you receiv | all businesses, including part | -time activities. | endar years? |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | / 1 of current year until filed for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$34,805.00 | ☐ Wages, commissions, bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |

☐ Operating a business

Official Form 107

Desc Main Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18

Page 37 of 55 Document ase number (if known) Debtor 1 **Brooke L. Davis** Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$62,964.00 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$62,615.00 □ Wages, commissions, Wages, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. Describe below. (before deductions each source (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7. ☐ Yes

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount vou Was this payment for ... paid still owe

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 38 of 55 Case number (if known)

Debtor 1 Brooke L. Davis

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | |
|-----|---|--|----------------------|----------------------|------------------------------|--------------------------------|
| | No | | | | | |
| | Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason fo | r this payment |
| 8. | Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos | | ments or transfer a | any property on a | ccount of a c | lebt that benefited an |
| | No | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | | r this payment ditor's name |
| Pa | rt 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of t | he case |
| | PennyMac Loan Services, LLC v. Brooke Heidbrick;Matthew Heidbrick; Unknown Owners and Nonrecord Claimants 17 CH 00311 | Mortgage Foreclosure Alias Summons | Lake Count, IL | | ■ Pending □ On app □ Conclud | eal |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. | | | | | |
| | □ No. Go to line 11. | | | | | |
| | Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the property |
| | | Explain what happened | | | р.орол. | |
| | Baxter Credit Union Att: Legal Dept. | 2006 Volkswagen Pa | ssat | 12/16 | 6 | \$5,127.00 |
| | 400 N. Lakeview Parkway Vernon Hills, IL 60061 | ■ Property was repossessed.□ Property was foreclosed.□ Property was garnished. | | | | |
| | | ☐ Property was attached | d, seized or levied. | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details. | | luding a bank or fi | nancial institution | , set off any | amounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | | action was | Amount |
| | | | | taken | | |

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Page 39 of 55 Case number (if known) Document Debtor 1 Brooke L. Davis 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No ☐ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You David M. Siegel & Associates **Attorney Fees** 5/26/17-7/6/17 \$400.00 790 Chaddick Drive Wheeling, IL 60090

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

To not include any payment of transfer that you listed on line to.

| ■ No | | | |
|--------------------------------|---|-----------------------------------|-------------------|
| Yes. Fill in the details. | | | |
| Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

ase number (*if known*)

Debtor 1 Brooke L. Davis

transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο ☐ Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was property transferred **Address** payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a **beneficiary?** (These are often called asset-protection devices.) Nο П Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. П Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Last balance Date account was account number closed, sold, before closing or Address (Number, Street, City, State and ZIP instrument Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Describe the contents Who else has or had access Do you still have it? Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code)

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Code)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Case 17-20499 Page 41 of 55
Case number (if known) Document

Debtor 1 **Brooke L. Davis**

| | regulations controlling the cleanup of thes | | aw whathan you naw awa ananata | | | |
|-----|--|---|--|-----------------------|--|--|
| | Site means any location, facility, or proper to own, operate, or utilize it, including disp | - | aw, wnetner you now own, operate, | or utilize it or used | | |
| | Hazardous material means anything an en hazardous material, pollutant, contaminan | | waste, hazardous substance, toxic | substance, | | |
| Rep | oort all notices, releases, and proceedings t | hat you know about, regardless of when | they occurred. | | | |
| 24. | Has any governmental unit notified you that | at you may be liable or potentially liable | under or in violation of an environm | ental law? | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | |
| 25. | Have you notified any governmental unit o | of any release of hazardous material? | | | | |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | |
| 26. | Have you been a party in any judicial or ad | Iministrative proceeding under any envi | ronmental law? Include settlements | and orders. | | |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | |
| Pai | rt 11: Give Details About Your Business o | | | | | |
| | | - | y of the following connections to an | v business? | | |
| 21. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? | | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | |
| | ☐ A partner in a partnership | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | |
| | No. None of the above applies. Go to Part 12. | | | | | |
| | ☐ Yes. Check all that apply above and fi | II in the details below for each business | | | | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security | | | |
| | , | Name of accountant of Bookkeeper | Dates business existed | | | |
| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | | | | |
| | No | | | | | |
| | ☐ Yes. Fill in the details below. | | | | | |

Part 12: Sign Below

Name

Address

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

Date Issued

(Number, Street, City, State and ZIP Code)

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main

Debtor 1 Brooke L. Davis

Document Page 42 of 55

Case number (if known)

| /s/ Brooke L. Davis | | |
|--|---|------------|
| Brooke L. Davis Signature of Debtor 1 | Signature of Debtor 2 | |
| Date _July 10, 2017 | Date | |
| Did you attach additional pages to Yo | r Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official | Form 107)? |
| No | | |
| ☐ Yes | | |
| Did you pay or agree to pay someone | rho is not an attorney to help you fill out bankruptcy forms? | |
| No | | |
| ☐ Yes. Name of Person Attach | ne Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form | |

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 43 of 55

| Fill in this inform | mation to identify your cas | se: | | |
|---------------------------------|---|--------------------|---|--|
| Debtor 1 | Brooke L. Davis | | |] |
| D 14 0 | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | nkruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | Check if this is an |
| | | | | amended filing |
| Off: 5: 51 E 5 | 100 | | | |
| Official Fo | | | | _ |
| Statemer | nt of Intention | tor Indiv | <u>riduals Filing Under Chapt</u> | er / 12/15 |
| If you are an indi | ividual filing under chapte | er 7. vou must fil | Il out this form if: | |
| • | e claims secured by your | | | |
| you have leas | sed personal property and | the lease has n | ot expired. | |
| | ever is earlier, unless the o | | you file your bankruptcy petition or by the date setime for cause. You must also send copies to the | |
| | eople are filing together in | a joint case, bo | oth are equally responsible for supplying correct i | information. Both debtors must |
| | and accurate as possible. our name and case numb | | s needed, attach a separate sheet to this form. Or | n the top of any additional pages, |
| Part 1: List Yo | our Creditors Who Have S | Secured Claims | | |
| 1 For any credit | ors that you listed in Part | 1 of Schedule D | : Creditors Who Have Claims Secured by Proper | ty (Official Form 106D), fill in the |
| information be | elow. | | | |
| Identify the cre | editor and the property that | is collateral | What do you intend to do with the property that secures a debt? | at Did you claim the property as exempt on Schedule C? |
| | | | | |
| Creditor's B | BMO Harris Bank NA | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | |
| Description of | 2016 Honda Civic 38 | 000k miles | ■ Retain the property and enter into a | Yes |
| property | BMO Harris Bank NA | • | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt: | Secured Lien \$22,03 | 9 | — Retail the property and [explain]. | _ |
| Creditor's P | ennymac Loan Service | es | ☐ Surrender the property. | □ No |
| name: | , | | Retain the property and redeem it. | |
| Description of | 223 Heritage Trail Ha | inesville II | ☐ Retain the property and enter into a | ■ Yes |
| property | 60030 Lake County | iiiiesviile, IL | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt: | • | | Debtor will retain collateral and continue to make regular payments. | е |

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 44 of 55 $^{7/10/17}$ 1:00PM

| Debtor 1 Brooke L. Davis | Case number (if known) |
|---|--|
| | |
| essor's name: | □ No |
| Description of leased | |
| Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| | |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased | □ NO |
| Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased | |
| Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased | <u>_</u> |
| Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased | <u>_</u> |
| Property: | ☐ Yes |
| Part 3: Sign Below | |
| Inder penalty of perjury, I declare that I have indicate roperty that is subject to an unexpired lease. | ed my intention about any property of my estate that secures a debt and any personal |
| X /s/ Brooke L. Davis | X |
| Brooke L. Davis | Signature of Debtor 2 |
| Signature of Debtor 1 | |
| Data July 10, 2017 | Data |

Page 45 of 55 Document

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| C | hapter 7: | Liquidation |
|----------|-----------|--------------------|
| | \$245 | filing fee |
| | \$75 | administrative fee |
| <u>+</u> | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 49 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Brooke L. Da | ıvis | | Case No. | | |
|--------|---|--|--|---|-------------------------------------|--|
| | | | Debtor(s) | Chapter | 7 | |
| | DIS | SCLOSURE OF CO | MPENSATION OF ATTOR | RNEY FOR DI | EBTOR(S) | |
| C | compensation paid t | to me within one year before | P. 2016(b), I certify that I am the attorner the filing of the petition in bankruptcy, aplation of or in connection with the bank | or agreed to be paid | to me, for services rendered or to | |
| | For legal service | ces, I have agreed to accept_ | | \$ | 1,650.00 | |
| | Prior to the fili | ing of this statement I have re | eceived | \$ | 400.00 | |
| | Balance Due | | | \$ <u></u> | 1,250.00 | |
| 2. | The source of the co | ompensation paid to me was: | : | | | |
| | Debtor | ☐ Other (specify): | | | | |
| 3. | The source of comp | pensation to be paid to me is: | | | | |
| | Debtor | ☐ Other (specify): | | | | |
| 4. | ■ I have not agree | ed to share the above-disclos | ed compensation with any other person | unless they are mem | bers and associates of my law firm. | |
| I | | | compensation with a person or persons w | | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | |
| t c | Preparation and Representation of [Other provision Negotiati agreement | filing of any petition, schedu of the debtor at the meeting on as as needed] ions with secured credit | and rendering advice to the debtor in detective ules, statement of affairs and plan which of creditors and confirmation hearing, and ors to reduce to market value; exemple needed; preparation and filing of regoods. | may be required; d any adjourned hea mption planning; | rings thereof; | |
| 6. I | Represer | | closed fee does not include the following any dischargeability actions, judio roceeding. | | es (except in Chapter 13 | |
| | | | CERTIFICATION | | | |
| this b | certify that the for ankruptcy proceedi | egoing is a complete statemeing. | ent of any agreement or arrangement for | payment to me for r | epresentation of the debtor(s) in | |
| Jı | uly 10, 2017 | | /s/ David M. Siege | ı | | |
| D | ate | | David M. Siegel | | | |
| | | | Signature of Attorne David M. Siegel & | | | |
| | | | 790 Chaddick Driv | ve | | |
| | | | Wheeling, IL 6009 (847) 520-8100 | 0 | | |

Name of law firm

Chapter 7 Bankruptcy Retainer Agreement

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
 - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
 - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were not originally provided by the Client. The Client has the full responsibility to ensure that all creditors are listed.
 - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
 - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

Important Bankruptcy Information

Debts that are Discharged

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts that are Not Discharged

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

- a) Debts for most taxes;
- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;

H.

- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;

The FLAT FEE for representation in this matter will be \$

Signed:

h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

Client acknowledge that he or she has read this agreement in its entirety, understands it fully, has had an

| opportunity to ask questions regarding this agreeme | ent, is satisfied with it, and accepts it in its entirety. |
|---|--|
| Date: 5/26/17 | Signed: Male & Mavis |
| | Print: Brooke L. Davis |
| | • |
| Date: | Signed: |
| | Print: |
| , | |

Attorney for David M. Siegel

Case 17-20499 Doc 1 Filed 07/10/17 Entered 07/10/17 13:08:18 Desc Main Document Page 52 of 55 Desc Main $\frac{7/10/17}{1:00PM}$

United States Bankruptcy Court Northern District of Illinois

| In re | Brooke L. Davis | | Case No. | |
|-------|---|--|----------------------------|------------------|
| | | Debtor(s) | Chapter 7 | |
| | | | | |
| | V | ERIFICATION OF CREDITOR M | ATRIX | |
| | | Number of | Creditors: | 32 |
| | The above-named Debtor((our) knowledge. | s) hereby verifies that the list of credit | ors is true and correct to | o the best of my |
| | July 10, 2017 | /s/ Brooke L. Davis | | |

Baxter Credit Union 340 N Milwaukee Ave Vernon Hills, IL 60061

Baxter Credit Union 400 North Lakeview Parkway Vernon Hills, IL 60061

Baxter Credit Union PO Box 8133 Vernon Hills, IL 60061

BMO Harris Bank NA Po Box 94934 Palatine, IL 60069

Cap One Bankruptcy Dept. PO Box 30285 Salt Lake City, UT 84130-0285

Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Capital One Bank Usa 15000 Capital One Dr Richmond, VA 23238

Capital One Bank, N.A. PO Box 71083 Charlotte, NC 28272-1083

Dept of Ed/Navient PO Box 9635 Wilkes Barre, PA 18773

Dept Of Education/neln 3015 Parker Rd Aurora, CO 80014

GECRB/JC Penneys PO Box 981402 El Paso, TX 79998 GECRB/JC Penneys PO Box 965007 Orlando, FL 32896

GECRB/Jcp PO Box 960090 Orlando, FL 32896-0090

GECRB/JCP PO Box 984100 El Paso, TX 79998

Julie Dejong 15W030 North Frontage Road, Ste. 10 Burr Ridge, IL 60527

Kay Jewelers
375 Ghent Rd
Fairlawn, OH 44333

Kohl/Cap1 PO Box 6497 Sioux Falls, SD 57117

Kohl/Capital One PO Box 3115 Milwaukee, WI 53201-3115

Lois Kulinsky & Associates, LTD. Attorneys at Law 395 East Dundee Rd., Ste. 200 Wheeling, IL 60090

Northwestern Lake Forest Hospital 660 N. Westmoreland Road Lake Forest, IL 60045-1659

ONEMAIN 230 Randall Road South Elgin, IL 60177-2274

Pennymac Loan Services 6101 Condor Dr. Moorpark, CA 93021 PennyMac Loan Services PO Box 9109 Temecula, CA 92589-9109

PennyMac Loan Services, LLC PO Box 660929 Dallas, TX 75266-0929

Perakis, Resis, Woods & Assoc 3 Hawthorn Pkwy, Suite 150 Vernon Hills, IL 60061

SYNCB/JC PENNEY DC PO Box 965007 Orlando, FL 32896-5007

SYNCB/JC Penney DC PO Box 965036 Orlando, FL 32896-5036

SYNCB/JC Penneys PO Box 965036 Orlando, FL 32896-5036

SYNCB/Old Navy PO Box 965005 Orlando, FL 32896-5005

Target NB CCS Gray OPS Center PO Box 6497 Sioux Falls, SD 57117

Target NB
Attn:Bankruptcy Dept.
PO Box 673
Minneapolis, MN 55440

University Accounting Service LLC PO Box 5291 Carol Stream, IL 60197